

Appendix J

Compliance Checklists

NOTE: The following fifteen checklists provide only a summary of the requirements of the standards and do not supersede the standards in any manner. Compliance determinations are based on the standards published in the Code of Federal Regulations.

Summary of Pulping System Vent Inspection Checklists

Facility Name:	
Facility Location:	
Facility TRI ID #:	
Inspector:	
Date:	

The table below explains which inspection checklists you should use for determining compliance with the pulping system vent requirements:

If you are complying with this emission standard . . .	Using this control device or technique . . .	Then use the following checklists ^{a,b} . . .	Starting on page number . . .
Pulping systems at kraft, soda, and semi-chemical processes	A thermal oxidizer	2	5
	A boiler, lime kiln, or recovery furnace in which the vent gases are introduced with the primary fuel or into the flame zone	3	7
	A boiler or recovery furnace with a heat input rate greater than 44 megawatts in which the vent gases are introduced with the combustion air	3	7
	Any other control device	4	8
Pulping systems at kraft processes	The clean condensate alternative	5	10
Pulping systems at sulfite processes	A gas scrubber	7	13
	Any control device other than a gas scrubber	8	15

^aChecklist 1 applies only if the extended compliance period is used for high volume, low concentration (HVLC) pulping system vents at kraft mills.

^bChecklist 9 applies to all vent control options.

Summary of Bleaching System Vent Inspection Checklists

Facility Name: _____
Facility Location: _____
Facility TRI ID #: _____
Inspector: _____
Date: _____

The table below explains which inspection checklists you should use for determining compliance with the bleaching system vent requirements for total chlorinated HAP.

If you are using this device . . .	Then use the following checklists ^{a,b} . . .	Starting on page number . . .
A gas scrubber	7	13
Any other control device or technique	8	15

^aChecklist 6 applies only if the extended compliance period is used for bleaching systems participating in the Voluntary Advanced Technologies Incentives Program.

^bChecklist 9 applies to all vent control options.

Checklists for Kraft Pulping System Condensate Inspections

Facility Name:	
Facility Location:	
Facility TRI ID #:	
Inspector:	
Date:	

The table below explains which inspection checklists you should use for determining compliance with the pulping system condensate requirements.

If you are complying with this control device or using this technique to comply with the standards . . .	Then use the following checklists ^{a,b} . .	Starting on page number . . .
A steam stripper	11	23
An open biological treatment system	12	25
Recycling to a controlled piece of pulping system process equipment	13	28
Any other control device	14	29

^aChecklist 10 applies only if the volume reduction options are used to segregate regulated kraft pulping system condensate streams for treatment.

^bChecklist 15 applies to all condensate control options.

Checklist 1:**Kraft Pulping Vent Extended Compliance Periods (§63.440(d)(1))**

Facility Name: _____
Facility Location: _____
Facility TRI ID #: _____
Inspector: _____
Date: _____

The questions in the tables below are applicable to existing high volume, low concentration (HVLC) pulping system vents that receive the extended compliance period (April 17, 2006). The questions are also applicable to HVLC pulping system vents that achieve compliance using the Clean Condensate Alternative. A “no” response to any question in this checklist means noncompliance with the HVLC pulping system standards.

A. Recordkeeping and Reporting Requirements		Comments
1.	Did you submit an initial control strategy report with your Notification of Compliance Status Report? §63.9(h), §63.455(b)	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.	For vents that have not achieved compliance, do you update the control strategy report every two years? §63.455(b)	<input type="checkbox"/> Yes <input type="checkbox"/> No
<hr/>		
3.	Do you maintain records for 5 years? §63.10(b)	<input type="checkbox"/> Yes <input type="checkbox"/> No

Checklist 2:**Requirements for Thermal Oxidizers (§63.443(d)(1) through (d)(3))**

Facility Name: _____
Facility Location: _____
Facility TRI ID #: _____
Inspector: _____
Date: _____

Note: A “no” response to any question in this checklist means noncompliance with the pulping system vent standards.

A. Monitoring and Inspection Requirements	Comments
1. Do you measure the firebox temperature, the temperature in the ductwork immediately downstream of the firebox (before any heat exchange occurs), or the outlet total HAP concentration during the periods that the device is being used to comply with the pulping vent standards? §63.453(b)	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Do you check the zero (low-level) and high-level calibration drifts at least once per day in accordance with your continuous monitoring system (CMS) performance evaluation test plan? §63.8(c)(6)	<input type="checkbox"/> Yes <input type="checkbox"/> No
B. Recordkeeping and Reporting Requirements	Comments
1. Did you submit in your Notification of Compliance Status Report all of the following:	
• results of the initial performance test or design evaluation? §63.9(h)	<input type="checkbox"/> Yes <input type="checkbox"/> No
• documentation to establish the minimum firebox or ductwork temperature or total HAP concentration monitoring parameter value, monitoring frequency, and averaging time? §63.453(n)	<input type="checkbox"/> Yes <input type="checkbox"/> No
• results of CMS performance evaluation? §63.10(e)(2)(i)	<input type="checkbox"/> Yes <input type="checkbox"/> No

(Continued)

Checklist 2: (Concluded)**Requirements for Thermal Oxidizers (§63.443(d)(1) through (d)(3))**

B. Recordkeeping and Reporting Requirements	Comments
2. Do you keep records of the firebox or ductwork temperature or outlet total HAP concentration measurements? §63.10(c)	<input type="checkbox"/> Yes <input type="checkbox"/> No
<hr/>	
3. Do you submit in your Excess Emission and Summary Reports all of the following §63.10(e)	
<ul style="list-style-type: none">• all monitoring data for all operating days or blocks when the average firebox or ductwork temperature is lower than the minimum temperature established during the initial or subsequent performance tests?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none">• identification of all operating days or blocks when insufficient monitoring parameter data were collected?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p><i>Excess emissions allowances (including periods of monitoring parameter deviations and periods when the thermal oxidizer was inoperable) during a semi-annual reporting period are 1 percent for LVHC system vents and 4 percent for HVLC and combined HVLC and LVHC system vents. The excess emissions do not include periods of startup, shutdown, and malfunction.</i></p> <p>§63.443(e)</p>	
<hr/>	
4. Do you maintain records for 5 years? §63.10(b)	<input type="checkbox"/> Yes <input type="checkbox"/> No

Checklist 3:**Requirements for Boilers, Lime Kilns, and Recovery Furnaces (§63.443(d)(4))**

Facility Name: _____
Facility Location: _____
Facility TRI ID #: _____
Inspector: _____
Date: _____

Note: A “no” response to any question in this checklist means noncompliance with the pulping system vent standards.

A. Recordkeeping and Reporting Requirements	Comments
1. Did you submit results of the design evaluation in your Notification of Compliance Status Report? §63.9(h) <input type="checkbox"/> Yes <input type="checkbox"/> No	
2. Do you identify in your Excess Emission and Summary Reports all of the operating days or blocks when the boiler, lime kiln, or recovery furnace was not operable? §63.10(e) <input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>Excess emissions allowances (including periods of monitoring parameter deviations and periods when the combustion device was inoperable) during a semi-annual reporting period are 1 percent for LVHC system vents and 4 percent for HVLC and combined HVLC and LVHC system vents. The excess emissions do not include periods of startup, shutdown, and malfunction. §63.443(e)</i>	
3. Do you maintain records for 5 years? §63.10(b) <input type="checkbox"/> Yes <input type="checkbox"/> No	

Checklist 4:**Requirements for Other Kraft Pulping System Vent Control Devices (§63.443(d)(1))**

Facility Name: _____
Facility Location: _____
Facility TRI ID #: _____
Inspector: _____
Date: _____

Note: A “no” response to any question in this checklist means noncompliance with the pulping system vent standards.

A. Monitoring and Inspection Requirements	Comments
1. Did you get approval from the Administrator for the parameters to be monitored and the parameter value(s)? §63.453(n) <input type="checkbox"/> Yes <input type="checkbox"/> No	
2. Did you install a continuous monitoring system (CMS) to measure approved monitoring parameters? §63.453(m) <input type="checkbox"/> Yes <input type="checkbox"/> No	
3. Do you measure the approved monitoring parameter(s) during the periods that the device is being used to comply with the pulping vent standards? §63.453(b) <input type="checkbox"/> Yes <input type="checkbox"/> No	
4. Do you check the zero (low-level) and high-level calibration drifts at least once per day in accordance with your continuous monitoring system (CMS) performance evaluation test plan? §63.8(c)(6) <input type="checkbox"/> Yes <input type="checkbox"/> No	
B. Recordkeeping and Reporting Requirements	Comments
1. Did you submit all of the following in your Notification of Compliance Status Report: <ul style="list-style-type: none"> • results of the initial performance test or design evaluation? §63.9(h) <input type="checkbox"/> Yes <input type="checkbox"/> No • documentation to establish the monitoring parameter value(s), monitoring frequency, and averaging time? §63.453(n) <input type="checkbox"/> Yes <input type="checkbox"/> No 	

(Continued)

Checklist 4: (Concluded)**Requirements for Other Kraft Pulping System Vent Control Devices (§63.443(d)(1))**

B. Recordkeeping and Reporting Requirements	Comments
<ul style="list-style-type: none">• results of CMS performance evaluation? <input type="checkbox"/> Yes <input type="checkbox"/> No §63.10(e)(2)(i)	
2. Do you keep records of the monitoring parameter measurements? §63.10(c)	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Do you submit in your Excess Emission and Summary Reports all of the following: §63.10(e)	
<ul style="list-style-type: none">• all monitoring data for all operating days or blocks when the monitoring parameter(s) are outside the value(s) or range(s) established during the initial or subsequent performance tests? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<ul style="list-style-type: none">• identification of all operating days or blocks when insufficient monitoring parameter data were collected? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>Excess emissions allowances (including periods of monitoring parameter deviations and periods when the control device was inoperable) during a semi-annual reporting period are 1 percent for LVHC system vents and 4 percent for HVLC and combined HVLC and LVHC system vents. The excess emissions do not include periods of startup, shutdown, and malfunction.</i> §63.443(e)	
4. Do you maintain records for 5 years? §63.10(b)	<input type="checkbox"/> Yes <input type="checkbox"/> No

Checklist 5:
Requirements for the Clean Condensate Alternative (§63.447)

Facility Name: _____
Facility Location: _____
Facility TRI ID #: _____
Inspector: _____
Date: _____

The questions below are applicable to HVLC pulping system vents that achieve compliance using the Clean Condensate Alternative (CCA). A “no” response to any question in this checklist means noncompliance with the HVLC pulping system standards.

A. Monitoring and Inspection Requirements	Comments
1. Did you install a continuous monitoring system (CMS) to measure approved monitoring parameters? §63.447(b)	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Did you get approval from the Administrator for the parameters to be monitored and the parameter value(s)? §63.453(n)	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Do you measure the approved monitoring parameter(s) during the periods which the CCA is being used to demonstrate compliance with the HVLC pulping system vent requirements? §63.447(b)	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Do you check the zero (low-level) and high-level calibration drifts at least once per day in accordance with your continuous monitoring system (CMS) performance evaluation test plan? §63.8(c)(6)	<input type="checkbox"/> Yes <input type="checkbox"/> No
B. Recordkeeping and Reporting Requirements	Comments
1. Did you submit an initial control strategy report? §63.447(g)	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Did you update the control strategy report every two years? §63.447(g)	<input type="checkbox"/> Yes <input type="checkbox"/> No

(Continued)

Checklist 5: (Concluded)**Requirements for the Clean Condensate Alternative (§63.447)**

B. Recordkeeping and Reporting Requirements	Comments
3. Did you report the rationale, calculations, test procedures, and data documentation used to demonstrate compliance using the CCA? §63.447(h)	<input type="checkbox"/> Yes <input type="checkbox"/> No
<hr/>	
4. Did you submit in your Notification of Compliance Status Report all of the following:	
• results of the initial performance test? §63.9(h)	<input type="checkbox"/> Yes <input type="checkbox"/> No
• documentation to establish the monitoring parameter value(s), monitoring frequency, and averaging time? §63.453(n)	<input type="checkbox"/> Yes <input type="checkbox"/> No
• results of CMS performance evaluation? §63.10(e)(2)(i)	<input type="checkbox"/> Yes <input type="checkbox"/> No
<hr/>	
5. Do you submit in your Excess Emission and Summary Reports all of the following: §63.10(e)	
• all monitoring data for all operating days or blocks when the monitoring parameter(s) are outside the value(s) or range(s) established during the initial or subsequent performance tests?	<input type="checkbox"/> Yes <input type="checkbox"/> No
• identification of all operating days or blocks when insufficient monitoring parameter data were collected?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<hr/>	
6. Do you maintain records for 5 years? §63.10(b)	<input type="checkbox"/> Yes <input type="checkbox"/> No

Checklist 6:**Bleaching System Vent Extended Compliance Periods (§63.440(d))**

Facility Name: _____
Facility Location: _____
Facility TRI ID #: _____
Inspector: _____
Date: _____

The questions in the tables below are applicable to existing bleaching systems that receive the extended compliance period (April 15, 2004) by limiting the application rates of chlorine and hypochlorite. A “no” response to any question in this checklist means noncompliance with the bleaching systems standards.

A. Monitoring and Inspection Requirements	Comments
1. Do you monitor the average daily application rates (kilograms bleaching agent per megagram of oven-dried pulp) of chlorine and hypochlorite? §63.453(e)	<input type="checkbox"/> Yes <input type="checkbox"/> No

B. Recordkeeping and Reporting Requirements	Comments
1. Do you record the average daily application rates of chlorine and hypochlorite? §63.454(c)	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Did you submit an initial control strategy report with your Notification of Compliance Status Report? §63.9(h), §63.455(b)	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. For vents that have not achieved compliance, do you update the control strategy report every two years? §63.455(b)	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Do you certify in your Excess Emission and Summary Reports that the daily application rates of chlorine and hypochlorite have not increased above the rates used over the three month period prior to June 15, 1998? §63.440(d)(3)ii)(B)(1), §63.455(c)	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Do you maintain records for 5 years? §63.10(b)	<input type="checkbox"/> Yes <input type="checkbox"/> No

Checklist 7:**Requirements for Gas Scrubbers (§63.444(c), §63.445(c))**

Facility Name: _____
Facility Location: _____
Facility TRI ID #: _____
Inspector: _____
Date: _____

The questions in the table below apply to gas scrubbers used to control HAP emissions from bleaching system and sulfite pulping system vents. Gas scrubbers have the option of monitoring either operating parameters (question 1.a.) or outlet concentration (question 1.b.). A “no” response to any question in this checklist means noncompliance with the bleaching or sulfite pulping systems standards.

A. Monitoring and Inspection Requirements	Comments
1.a Do you measure the following parameters during the periods that the gas scrubber is being used to comply with the applicable standard: §63.453(c)	
<ul style="list-style-type: none"> pH or the oxidation/reduction potential of the gas scrubber effluent? <input type="checkbox"/> Yes <input type="checkbox"/> No 	
<ul style="list-style-type: none"> gas scrubber vent gas inlet flow rate? <input type="checkbox"/> Yes <input type="checkbox"/> No 	
<ul style="list-style-type: none"> gas scrubber liquid influent flow rate? <input type="checkbox"/> Yes <input type="checkbox"/> No 	
1.b Do you measure the gas scrubber outlet concentration during the periods that the gas scrubber is being used to comply with the applicable standard? §63.453(d)	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Note: Gas scrubbers are allowed the option of monitoring outlet concentration (chlorine for bleaching systems, methanol for sulfite pulping systems) as an option to measuring the parameters listed in question 1.a.</i>	
2. Do you check the zero (low-level) and high-level calibration drifts at least once per day in accordance with your continuous monitoring system (CMS) performance evaluation test plan? §63.8(c)(6)	<input type="checkbox"/> Yes <input type="checkbox"/> No

(Continued)

Checklist 7: (Concluded)**Requirements for Gas Scrubbers (§63.444(c), §63.445(c))**

B.	Recordkeeping and Reporting Requirements	Comments
1.	Did you submit in your Notification of Compliance Status Report all of the following: <ul style="list-style-type: none">• results of the initial performance test or design evaluation? §63.9(h) <input type="checkbox"/> Yes <input type="checkbox"/> No• documentation to establish the monitoring parameter values, monitoring frequency, and averaging time? §63.453(n) <input type="checkbox"/> Yes <input type="checkbox"/> No• results of CMS performance evaluation? §63.10(e)(2)(i) <input type="checkbox"/> Yes <input type="checkbox"/> No	
2.	Do you submit in your Excess Emission and Summary Reports all of the following: §63.10(e) <ul style="list-style-type: none">• all monitoring data for all operating days or blocks when the monitoring parameter(s) are outside the value(s) or range(s) established during the initial or subsequent performance tests? <input type="checkbox"/> Yes <input type="checkbox"/> No• identification of all operating days or blocks when insufficient monitoring parameter data were collected? <input type="checkbox"/> Yes <input type="checkbox"/> No	
3.	Do you maintain records for 5 years? §63.10(b) <input type="checkbox"/> Yes <input type="checkbox"/> No	

Checklist 8:**Requirements for Other Sulfite Pulping and Bleaching System Vent Control Devices
(§63.444(c) and §63.445(c))**

Facility Name: _____
Facility Location: _____
Facility TRI ID #: _____
Inspector: _____
Date: _____

A “no” response to any question in this checklist means noncompliance with the bleaching system or sulfite pulping systems standards.

A. Monitoring and Inspection Requirements	Comments
1. Did you get approval from the Administrator for the parameters to be monitored and the parameter value(s)? §63.453(n)	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Did you install a continuous monitoring system (CMS) to measure approved monitoring parameters? §63.453(m)	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Do you measure the approved monitoring parameter(s) during the periods that the device is being used to comply with the applicable standard? §63.453(m)	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Do you check the zero (low-level) and high-level calibration drifts at least once per day in accordance with your continuous monitoring system (CMS) performance evaluation test plan? §63.8(c)(6)	<input type="checkbox"/> Yes <input type="checkbox"/> No
B. Recordkeeping and Reporting Requirements	Comments
1. Did you submit in your Notification of Compliance Status Report all of the following:	
• results of the initial performance test or design evaluation? §63.9(h)	<input type="checkbox"/> Yes <input type="checkbox"/> No
• documentation to establish the monitoring parameter value(s), monitoring frequency, and averaging time? §63.453(n)	<input type="checkbox"/> Yes <input type="checkbox"/> No

(Continued)

Checklist 8: (Concluded)

**Requirements for Other Sulfite Pulping and Bleaching System Vent Control Devices
(§63.444(c) and §63.445(c))**

B.	Recordkeeping and Reporting Requirements	Comments
	<ul style="list-style-type: none">• results of CMS performance evaluation? <input type="checkbox"/> Yes <input type="checkbox"/> No §63.10(e)(2)(i)	
2.	Do you submit in your Excess Emission and Summary Reports all of the following: §63.10(e) <ul style="list-style-type: none">• all monitoring data for all operating days or blocks when the monitoring parameter(s) are outside the value(s) or range(s) established during the initial or subsequent performance tests? <input type="checkbox"/> Yes <input type="checkbox"/> No• identification of all operating days or blocks when insufficient monitoring parameter data were collected? <input type="checkbox"/> Yes <input type="checkbox"/> No	
3.	Do you maintain records for 5 years? §63.10(b) <input type="checkbox"/> Yes <input type="checkbox"/> No	

Checklist 9:**Requirements for Enclosures and Closed-vent Systems (All Vent Control Options)**

Facility Name: _____
Facility Location: _____
Facility TRI ID #: _____
Inspector: _____
Date: _____

A “no” response to any question in this checklist means noncompliance with the closed-vent system standards.

A.	Monitoring and Inspection Requirements	Comments
1.	Do you visually inspect each enclosure opening every 30 days to ensure that the opening is maintained in the closed position and sealed, except when necessary for sampling, inspection, maintenance, or repairs? §63.450(b), §63.453(k)(1)	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Note: Enclosure openings that were not closed during the initial or subsequent performance tests are not required to be closed and sealed.</i>		
2.	Do you visually inspect the closed-vent system (including duct work, piping, enclosures, and connections to covers) every 30 days for visible evidence of defects? §63.453(k)(2)	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.	For closed-vent systems (or portions of systems) that are operated under positive pressure, do you demonstrate annually that no detectable leaks exist? §63.453(k)(3)	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.	Do you demonstrate annually that each enclosure is maintained at negative pressure? §63.453(k)(4)	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.	Do you visually inspect the bypass line valve or closure mechanism every 30 days to ensure the valve is maintained in the closed position? §63.453(k)(5)	<input type="checkbox"/> Yes <input type="checkbox"/> No

(Continued)

Checklist 9:**Requirements for Enclosures and Closed-vent Systems (All Vent Control Options)**

A. Monitoring and Inspection Requirements	Comments
6. If your closed-vent system has bypass lines that could divert a vent stream away from the control device, have you done one of the following:	
<ul style="list-style-type: none"> used a flow indicator that takes a reading at least every 15 minutes? §63.450(d)(1) 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> for non-computer controlled bypass line valves, secured the bypass line valve in the closed position with a car-seal or a seal placed on the valve in such a way that the valve cannot be opened without breaking the seal? §63.450(d)(2) 	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. For any defects identified during the inspections: §63.453(k)(6)	
<ul style="list-style-type: none"> did you make the first effort of repair within 5 calendar days after detection? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> did you complete the repair within 15 calendar days? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
B. Recordkeeping and Reporting Requirements	Comments
1. For each enclosure opening, do you have all of the following records: §63.454(b)	
<ul style="list-style-type: none"> date of visual inspections? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> the enclosure type and identification? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> position of opening (i.e., open or closed and sealed)? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> results of negative pressure tests? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> the nature of any defects and method of detection (i.e., visual inspection or instrument detection)? 	<input type="checkbox"/> Yes <input type="checkbox"/> No

(Continued)

Checklist 9:**Requirements for Enclosures and Closed-vent Systems (All Vent Control Options)**

B. Recordkeeping and Reporting Requirements	Comments
<ul style="list-style-type: none"> the date the defect was detected and the date of each attempt to repair the defect? <input type="checkbox"/> Yes <input type="checkbox"/> No 	
<ul style="list-style-type: none"> repair methods applied in each attempt to repair the defect? <input type="checkbox"/> Yes <input type="checkbox"/> No 	
<ul style="list-style-type: none"> the reason for delay if the defect was not repaired within 15 days after discovery? <input type="checkbox"/> Yes <input type="checkbox"/> No 	
<ul style="list-style-type: none"> the date of successful repair of the defect if the repair was not completed within 15 days after discovery? <input type="checkbox"/> Yes <input type="checkbox"/> No 	
<p>2. For each closed-vent system, do you have all of the following records: §63.454(b)</p>	
<ul style="list-style-type: none"> date of visual inspections? <input type="checkbox"/> Yes <input type="checkbox"/> No 	
<ul style="list-style-type: none"> the closed-vent system type and identification? <input type="checkbox"/> Yes <input type="checkbox"/> No 	
<ul style="list-style-type: none"> results of leak detection tests (only for systems or portions of system operated under positive pressure)? <input type="checkbox"/> Yes <input type="checkbox"/> No 	
<ul style="list-style-type: none"> the nature of any defects or leak and method of detection (i.e., visual inspection or instrument detection)? <input type="checkbox"/> Yes <input type="checkbox"/> No 	
<ul style="list-style-type: none"> the date the defect or leak was detected and the date of each attempt to repair the defect? <input type="checkbox"/> Yes <input type="checkbox"/> No 	
<ul style="list-style-type: none"> repair methods applied in each attempt to repair the defect or leak? <input type="checkbox"/> Yes <input type="checkbox"/> No 	
<ul style="list-style-type: none"> the reason for delay if the defect or leak was not repaired within 15 days after discovery? <input type="checkbox"/> Yes <input type="checkbox"/> No 	

(Continued)

Checklist 9: (Concluded)**Requirements for Enclosures and Closed-vent Systems (All Vent Control Options)**

B. Recordkeeping and Reporting Requirements	Comments
<ul style="list-style-type: none">the date of successful repair of the defect or leak if the repair was not completed within 15 days after discovery? <input type="checkbox"/> Yes <input type="checkbox"/> No	
3. For each bypass line valve that is not computer-controlled, do you have all of the following records: <i>§63.454(b)</i>	
<ul style="list-style-type: none">date of visual inspections? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<ul style="list-style-type: none">condition of any valve seals? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<ul style="list-style-type: none">position of the bypass line valve? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<ul style="list-style-type: none">duration of bypass line valve opening? <input type="checkbox"/> Yes <input type="checkbox"/> No	
4. For each bypass line valve that is computer-controlled, do you have all of the following records: <i>§63.454(b)</i>	
<ul style="list-style-type: none">15 minute readings? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<ul style="list-style-type: none">times and durations of periods when the flow indicator is not operating? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<ul style="list-style-type: none">times and durations of periods when the vent stream is diverted from the control device? <input type="checkbox"/> Yes <input type="checkbox"/> No	
5. Do you maintain records for 5 years? <i>§63.10(b)(1)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Checklist 10:**Requirements for Condensate Volume Reduction Options (§63.446(c))**

Facility Name: _____
Facility Location: _____
Facility TRI ID #: _____
Inspector: _____
Date: _____

A “no” response to any question in this checklist means noncompliance with the kraft pulping system condensate standards.

A. Monitoring and Inspection Requirements	Comments
1. Did you get approval from the Administrator for the parameters to be monitored and the parameter value(s)? §63.453(n) <input type="checkbox"/> Yes <input type="checkbox"/> No	
2. Did you install a continuous monitoring system (CMS) to measure approved monitoring parameters? §63.453(a) <input type="checkbox"/> Yes <input type="checkbox"/> No	
3. Do you measure the approved monitoring parameter(s) during the periods which the device is controlling HAP from an emission stream? §63.453(i) <input type="checkbox"/> Yes <input type="checkbox"/> No	
4. Do you check the zero (low-level) and high-level calibration drifts at least once per day in accordance with your continuous monitoring system (CMS) performance evaluation test plan? §63.8(c)(6) <input type="checkbox"/> Yes <input type="checkbox"/> No	
B. Recordkeeping and Reporting Requirements	Comments
1. Did you submit in your Notification of Compliance Status Report all of the following: <ul style="list-style-type: none"> • results of the initial performance test or design evaluation? §63.9(h) <input type="checkbox"/> Yes <input type="checkbox"/> No • documentation to establish the monitoring parameter value(s), monitoring frequency, and averaging time? §63.453(n) <input type="checkbox"/> Yes <input type="checkbox"/> No 	

(Continued)

Checklist 10: (Concluded)

Requirements for Condensate Volume Reduction Options (§63.446(c))

B.	Recordkeeping and Reporting Requirements	Comments
	<ul style="list-style-type: none">• results of CMS performance evaluation? <input type="checkbox"/> Yes <input type="checkbox"/> No §63.10(e)(2)(i)	
2.	Do you submit in your Excess Emission and Summary Reports all of the following: §63.10(e) <ul style="list-style-type: none">• all monitoring data for all operating days or blocks when the monitoring parameter(s) are outside the value(s) or range(s) established during the initial or subsequent performance tests? <input type="checkbox"/> Yes <input type="checkbox"/> No• identification of all operating days or blocks when insufficient monitoring parameter data were collected? <input type="checkbox"/> Yes <input type="checkbox"/> No	
3.	Do you maintain records for 5 years? §63.10(b) <input type="checkbox"/> Yes <input type="checkbox"/> No	

Checklist 11:**Requirements for Steam Strippers (§63.446(e)(2) through (e)(5))**

Facility Name: _____
Facility Location: _____
Facility TRI ID #: _____
Inspector: _____
Date: _____

Steam strippers have the option of monitoring either operating parameters (question 1.a) or outlet concentration (question 1.b). A “no” response to any question in this checklist means noncompliance with the kraft pulping system condensate standards.

A.	Monitoring and Inspection Requirements	Comments
1.a.	Do you measure the following parameters during the periods that the steam stripper is removing HAP from pulping system condensates: §63.453(g) <ul style="list-style-type: none">process wastewater feed rate? <input type="checkbox"/> Yes <input type="checkbox"/> Nosteam feed rate? <input type="checkbox"/> Yes <input type="checkbox"/> Noprocess wastewater column feed temperature? <input type="checkbox"/> Yes <input type="checkbox"/> No	
1.b.	Do you measure the steam stripper outlet methanol concentration during the periods that the steam stripper is removing HAP from pulping system condensates? §63.453(h)	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Note: Steam stripper outlet methanol concentration can be measured as an option to measuring the parameters listed in question 1.a.</i>		
2.	Do you check the zero (low-level) and high-level calibration drifts of the steam stripper continuous monitoring system (CMS) at least once per day in accordance with your CMS performance evaluation test plan? §63.8(c)(6)	<input type="checkbox"/> Yes <input type="checkbox"/> No

(Continued)

Checklist 11: (Concluded)**Requirements for Steam Strippers (§63.446(e)(2) through (e)(5))**

B. Recordkeeping and Reporting Requirements	Comments
1. Did you submit all of the following in your Notification of Compliance Status Report:	
<ul style="list-style-type: none"> • results of the initial performance test? §63.9(h) <input type="checkbox"/> Yes <input type="checkbox"/> No 	
<ul style="list-style-type: none"> • documentation used to establish the monitoring parameter values? §63.453(n) <input type="checkbox"/> Yes <input type="checkbox"/> No 	
<ul style="list-style-type: none"> • results of CMS performance evaluation? §63.10(e)(2)(i) <input type="checkbox"/> Yes <input type="checkbox"/> No 	
2. Do you submit in your Excess Emission and Summary Reports all of the following: §63.10(e), §63.446(g)	
<ul style="list-style-type: none"> • all monitoring data for all operating days or blocks when the monitoring parameter(s) are outside the value(s) or range(s) established during the initial or subsequent performance tests? <input type="checkbox"/> Yes <input type="checkbox"/> No 	
<ul style="list-style-type: none"> • identification of all operating days or blocks when insufficient monitoring parameter data were collected? <input type="checkbox"/> Yes <input type="checkbox"/> No 	
<p><i>The excess emission allowances for steam strippers is 10 percent. The excess emissions include periods of monitoring parameter deviations, periods when the steam stripper was inoperable, and periods of startup, shutdown, and malfunction. §63.443(e)</i></p>	
3. Do you maintain records for 5 years? §63.10(b)	<input type="checkbox"/> Yes <input type="checkbox"/> No

Checklist 12:**Requirements for Open Biological Treatment Systems (§63.446(e)(2))**

Facility Name: _____
Facility Location: _____
Facility TRI ID #: _____
Inspector: _____
Date: _____

Open biological treatment systems have the option of monitoring either the parameters specified in the NESHAP or site-specific parameters (see question 1). A “no” response to any question in this checklist means noncompliance with the kraft pulping system condensate standards.

A. Monitoring and Inspection Requirements	Comments
1. Do you measure the following parameters during the periods that the open biological treatment system is removing HAP from pulping system condensates: §63.453(j)(1)	
<ul style="list-style-type: none"> • composite daily sample of composite BOD5 outlet concentration sample? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> • mixed liquor volatile suspended solids? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> • horsepower of aerator unit(s)? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> • inlet liquid flow 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> • liquid temperature 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> • daily inlet and outlet grab samples from each biological treatment unit (only if procedure 3 in Appendix C of Part 63 is used to demonstrate compliance) 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Note: Site-specific monitoring parameters can be measured as an option to measuring the parameters listed above.</i>	
2. If procedure 3 in Appendix C of Part 63 is used to demonstrate compliance, do you store the grab samples for five days at a maximum temperature of 4°C (40°F)? §63.457(n)	<input type="checkbox"/> Yes <input type="checkbox"/> No

(Continued)

Checklist 12:**Requirements for Open Biological Treatment Systems (§63.446(e)(2))**

A. Monitoring and Inspection Requirements	Comments
3. Do you check the zero (low-level) and high-level calibration drifts of the open biological treatment system continuous monitoring system (CMS) at least once per day in accordance with your CMS performance evaluation test plan? §63.8(c)(6)	<input type="checkbox"/> Yes <input type="checkbox"/> No

B. Recordkeeping and Reporting Requirements	Comments
1. Did you submit all of the following in your Notification of Compliance Status Report: <ul style="list-style-type: none">• results of the initial performance test? §63.9(h) <input type="checkbox"/> Yes <input type="checkbox"/> No• documentation to establish the monitoring parameter value(s), monitoring frequency, and averaging time? §63.453(n) <input type="checkbox"/> Yes <input type="checkbox"/> No• results of CMS performance evaluation? §63.10(e)(2)(i) <input type="checkbox"/> Yes <input type="checkbox"/> No	
2. Did you prepare a written record of the specific conditions that would expose a worker to dangerous, hazardous, or otherwise unsafe conditions when conducting a performance test? §63.454(e)	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Do you prepare a written record specifying the results of all performance tests conducted in response to a monitoring parameter deviation? §63.454(f)	<input type="checkbox"/> Yes <input type="checkbox"/> No

(Continued)

Checklist 12: (Concluded)**Requirements for Open Biological Treatment Systems (§63.446(e)(2))**

B.	Recordkeeping and Reporting Requirements	Comments
4.	If you used the results of a performance test, conducted in response to a monitoring parameter deviation, to revise the approved ranges or values of monitoring parameters, did you submit an initial notification of the performance test as soon as practicable, but no later than 15 days, before the test was scheduled? §63.455(e)	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.	Do you notify the Administrator as soon as practicable, but within 24 hours, of the onset of the dangerous, hazardous, or otherwise unsafe conditions and specify the reasons that the compliance determination cannot be made? §63.455(f)	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.	Do you maintain records for 5 years? §63.10(b)	<input type="checkbox"/> Yes <input type="checkbox"/> No

Checklist 13:**Requirements for Recycling Kraft Pulping Process Condensate to Controlled Pulping System Process Equipment (§63.446(e)(1))**

Facility Name: _____
Facility Location: _____
Facility TRI ID #: _____
Inspector: _____
Date: _____

There are no monitoring requirements for mills using the recycle option to treat condensates. A “no” response to any question in this checklist means noncompliance with the kraft pulping system condensate standards.

B. Recordkeeping and Reporting Requirements		Comments
1.	Did you submit the results of the design evaluation in your Notification of Compliance Status Report? §63.9(h) <input type="checkbox"/> Yes <input type="checkbox"/> No	

Checklist 14:**Requirements for Other Kraft Pulping Process Condensate Control Devices
(§63.446(e)(3), (4), and (5))**

Facility Name: _____
Facility Location: _____
Facility TRI ID #: _____
Inspector: _____
Date: _____

A “no” response to any question in this checklist means noncompliance with the kraft pulping system condensate standards.

A. Monitoring and Inspection Requirements	Comments
1. Did you get approval from the Administrator for the parameters to be monitored and the parameter value(s)? §63.453(n) <input type="checkbox"/> Yes <input type="checkbox"/> No	
2. Did you install a continuous monitoring system (CMS) to measure approved parameters? §63.453(m) <input type="checkbox"/> Yes <input type="checkbox"/> No	
3. Do you measure the approved monitoring parameter(s) during the periods which the device is controlling HAP from an emission stream? §63.453(a) <input type="checkbox"/> Yes <input type="checkbox"/> No	
4. Do you check the zero (low-level) and high-level calibration drifts at least once per day in accordance with your continuous monitoring system (CMS) performance evaluation test plan? §63.8(c)(6) <input type="checkbox"/> Yes <input type="checkbox"/> No	
B. Recordkeeping and Reporting Requirements	Comments
1. Did you submit all of the following in your Notification of Compliance Status Report:	
• results of the initial performance test or design evaluation? §63.9(h) <input type="checkbox"/> Yes <input type="checkbox"/> No	
• documentation to establish the monitoring parameter values, monitoring frequency, and averaging time? §63.453(n) <input type="checkbox"/> Yes <input type="checkbox"/> No	

(Continued)

Checklist 14: (Concluded)

**Requirements for Other Kraft Pulping Process Condensate Control Devices
(§63.446(e)(3), (4), and (5))**

B.	Recordkeeping and Reporting Requirements	Comments
	<ul style="list-style-type: none">• results of CMS performance evaluation? <input type="checkbox"/> Yes <input type="checkbox"/> No §63.10(e)(2)(i)	
2.	<p>Do you submit in your Excess Emission and Summary Reports all of the following: §63.10(e), §63.446(g)</p> <ul style="list-style-type: none">• all monitoring data for all operating days or blocks when the monitoring parameter(s) are outside the value(s) or range(s) established during the initial or subsequent performance tests? <input type="checkbox"/> Yes <input type="checkbox"/> No• identification of all operating days or blocks when insufficient monitoring parameter data were collected? <input type="checkbox"/> Yes <input type="checkbox"/> No <p><i>The excess emission allowances for control devices other than open biological treatment systems is 10 percent. The excess emissions include periods of monitoring parameter deviations, periods when the control device was inoperable, and periods of startup, shutdown, and malfunction. §63.443(e)</i></p>	
3.	Do you maintain records for 5 years? §63.10(b) <input type="checkbox"/> Yes <input type="checkbox"/> No	

Checklist 15:**Requirements for Closed Collection Systems (All Condensate Control Options)**

Facility Name: _____
Facility Location: _____
Facility TRI ID #: _____
Inspector: _____
Date: _____

A “no” response to any question in this checklist means noncompliance with the kraft pulping system condensate standards..

A. Monitoring and Inspection Requirements	Comments
1. Do you visually inspect each closed collection system every 30 days for evidence of defects? <i>§63.453(l)(1)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. For each condensate tank: <i>§63.446(d)(2)(i) and (ii), §63.453(l)(1)</i> <ul style="list-style-type: none"> do you demonstrate annually that no detectable leaks exist? <input type="checkbox"/> Yes <input type="checkbox"/> No do you verify that each tank opening is maintained in a closed, sealed position? <input type="checkbox"/> Yes <input type="checkbox"/> No 	
<i>Note: Tanks may be opened for condensate sampling or removal, or for equipment inspection, maintenance, or repair.</i>	
3. For drains controlled by water seals, do you verify that the appropriate liquid levels are being maintained and do you inspect for any other defects that could reduce the water seal control effectiveness? <i>§63.453(l)(1), §63.964(a)(1)(i)(A)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. For drains controlled using a closure device, do you verify that the closure device is in place and that there are no defects in the closure device? <i>§63.453(l)(1), §63.964(a)(1)(i)(B)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. For junction boxes, do you verify that the closure device(s) is in place and that there are no defects in the closure device? <i>§63.453(l)(1), §63.964(a)(1)(ii)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No

(Continued)

Checklist 15:**Requirements for Closed Collection Systems (All Condensate Control Options)**

A. Monitoring and Inspection Requirements	Comments
6. For unburied portions of the closed collection system, do you visually inspect the system to verify that all closure devices are in place and that there are no defects? §63.453(l)(2), §63.964(a)(1)(iii)	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. For any defects identified during the inspections: §63.453(l)(3), §63.964(b)	
<ul style="list-style-type: none"> • did you make the first effort of repair within 5 calendar days after detection? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> • did you complete the repair within 15 calendar days? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
B. Recordkeeping and Reporting Requirements	Comments
1. For each closed collection system, do you have all of the following records: §63.454(b)	
<ul style="list-style-type: none"> • date of visual inspections? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> • the nature of the defect and method of detection (i.e., visual inspection or instrument detection)? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> • the date the defect was detected and the date of each attempt to repair the defect? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> • repair methods applied in each attempt to repair the defect? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> • the reason for delay if the defect was not repaired within 15 days after discovery? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> • the date of successful repair of the defect if the repair was not completed within 15 days after discovery? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> • repair methods applied in each attempt to repair the defect or leak? 	<input type="checkbox"/> Yes <input type="checkbox"/> No

(Continued)

Checklist 15: (Concluded)**Requirements for Closed Collection Systems (All Condensate Control Options)**

B. Recordkeeping and Reporting Requirements	Comments
• the reason for delay if the defect or leak was not repaired within 15 days after discovery? <input type="checkbox"/> Yes <input type="checkbox"/> No	
• the date of successful repair of the defect or leak if the repair was not completed within 15 days after discovery? <input type="checkbox"/> Yes <input type="checkbox"/> No	
• duration of bypass line valve opening? <input type="checkbox"/> Yes <input type="checkbox"/> No	